PATENT APPLICATION FEE DETERMINATION RECORD Efféctive October 1, 2003

Application or Docket Number

-											7077	<u> </u>
		CLAIMS	•	FILED - PART I					ENTITY			R THAN
I	TOTAL CLAIM		(Column 1)		(Column 2)		TYPE			SMALL		
FOR			 	 		NUMBER EXTRA		RATE	FEE 385.0		RATE BASIC FEI	FEE .
1		EABLE CLAIMS	+					 		OF		[
╟			37 minus 20= *			17		X\$ 9=	<u> </u>	OR	:X\$18=	306.**
IJ-	ULTIPLE DEP	<u> </u>			5		X43=		OR	X86=	<u> 430.°°</u>	
-	· ,	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·]	+145=		OR	+290=	
*	If the difference	e in column 1 i	s less than z	less than zero, enter "0" in column 2				TOTAL		OR	TOTAL	150600
5	24/04	(Column 1)		MENDED - PART II (Column 2) (Column 3)				SMALI	. ENŤITY	OR		THAN ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOU PAID FO	R	PRESENT EXTRA		RATE	ADDI- TIONA FEE		RATE	. ADDI- TIONAL FEE
ğ	Total	. 22	Minus	-31		= Ø ·		X\$ 9=		OR	X\$18=	. /
AME	Independent	* 3	Minus	8 m		- X		X43=	1/	OR	X86=	
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						1	+145=	17.	OR	+290=	
	•	•					4	TOTAL		OR	TOTAL ADDIT. FEE	1.
		(Column 1)		(Column		(Column 3)						
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBEI PREVIOUS PAID FO	R SLY.	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	*	Minus	44		=		X\$ 9=		OR	· X\$18=	
AME	Independent		Minus	ana .		=	·	X43=		OR	X86=	
	FIRST PRESE	NIAHON OF M	JUIPLE DEF	TIPLE DEPENDENT CI		AIM []		+145=		OR	+290=	
٠	÷					L	TOTAL DOIT, FEE			TOTAL ODIT. FEE		
		(Column 1)	•	(Column	2)	(Column 3)			•			
באונ	•	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUS PAID FOR	EY	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AWENDMEN	Total	*	Minus	<u> </u>		=		X\$ 9=		OR	X\$18=	
	ndependent	•	Minus	***		=		X43=		OR	X86=	
	HIRST PRESE	NTATION OF MU	LTIPLE DEP	ENDENT CL	AIM		-					
• •• ic:	he entry in colum	nn 1 is less than the iber Previously Pai	entry in colum	nn 2, write "0" i	n colur	nn 3.	<u></u>	145= TOTAL		OR	+290= TOTAL	
11	the "Highest Nun	nber Previously Pai nber Previously Paid ner Previously Paid	d For IN THIS	SPACE is less	s than :	3, enter "3."		in the app	ropriate box		DOIT. FEE L. nn 1.	